24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Sc	chedule E)			FOR SE OF	FORM 24/48			
	ME OF COMMITTEE (In Full) Iational Rifle Association of America Political Victory Fund		FEC	IDENTIFICATION C00053553	ON NUMBER ▼			
Check if 24-hour report 48-hour report New report Amends report filed on								
	Full Name of Payee Tactical Guns & Gear, LLC Mailing Address 4400 Kiln Court			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City State Zip Code Louisville KY 40218 Purpose of Expenditure		200.00 Transaction ID : 62374142 Date of Disbursement or Obligation					
	Booth Rental Category Type 004	Office Sou			District:			
	Sen. Mitch McConnell Oppose		ident	X Senate	State: KY			
		Disbursem 2014		Primary specify) ▶	General			
	Full Name of Payee Prolist Inc.	Dat	e of Pub	Distribution/	Dissemination 2014			
	Mailing Address 8341 Beechcraft Avenue	Am	ount					
	City State Zip Code Gaithersburg MD 20879-1509			, ID: 62716539 bursement or C	13684.33			
	Purpose of Expenditure Postage Category/ Type 004		M M		YIYIYIY			
	Name of Federal Candidate William Southerland II Oppose	Office Sou	ight:	X House Senate	District: 02 State: FL			
		Disbursem 2014		Primary specify) ▶	General			
(a) SUBTOTAL of Itemized Independent Expenditures								
(b) SUBTOTAL of Unitemized Independent Expenditures								
	(c) TOTAL Independent Expenditures	•		7	4			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.								
	Mary Rose Adkins [Electronically Filed] Date Signature	10	30		4			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

PAGE 2 OF 3 FOR SE OF FORM 24/48								
AME OF COMMITTEE (In Full) National Rifle Association of America Polition	FEC IDENTIFICATION NUMBER ▼							
		C C00053553						
heck if X 24-hour report 48-hour report New report Amends report filed on								
Full Name of Payee		Date of Public Distribution/Dissemination						
Prolist Inc.		10 29 7 2014						
Mailing Address 8341 Beechcraft Avenue		Amount						
City State	Zip Code	2753.57						
Gaithersburg MD	20879-1509	Transaction ID: 62716541 Date of Disbursement or Obligation						
Purpose of Expenditure Postcards (Estimated Cost)	Category/ Type 004	M M / D D / Y Y Y Y						
Name of Federal Candidate	X Support	Office Sought: X House District: 02						
William Southerland II	Oppose	President Senate State: FL						
Calendar Year-To-Date Per Election for Office Sought	0.00	Disbursement For: Primary General 2014 Gher (specify) ▶						
Full Name of Payee		Date of Public Distribution/Dissemination						
Prolist Inc.		10 29 / Y Y Y Y Y Y						
Mailing Address 8341 Beechcraft Avenue		Amount						
City State	Zip Code	761.09						
Gaithersburg MD	20879-1509	Transaction ID : 62716546 Date of Disbursement or Obligation						
Purpose of Expenditure Postage	Category/ Type 004	M = M / D = D / Y = Y = Y						
Name of Federal Candidate	X Support	Office Sought: House District:						
Shelley Capito	Oppose	President Senate State: WV						
Calendar Year-To-Date Per Election for Office Sought	0.00	Disbursement For:						
·								
(a) SUBTOTAL of Itemized Independent Expenditures								
(b) SUBTOTAL of Unitemized Independent Expenditures								
(c) TOTAL Independent Expenditures		>						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.								
Mary Rose Adkins Signature	Electronically Filed] Date	10 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

		FOR SE OF FORM 24/48						
NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory	/ Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553						
		C C00053553						
Check if 24-hour report 48-hour report New report	Amends report filed on	M = M / D = D / Y = Y = Y						
Full Name of Payee	Date	of Public Distribution/Dissemination						
Prolist Inc.		10 29 2014						
Mailing Address 8341 Beechcraft Avenue	Amo	Amount						
City State Zip C	Code	497.71						
		saction ID : 62716549 of Disbursement or Obligation						
Purpose of Expenditure Postcards (Estimated Cost) Cate	egory/ Type 004	M = M / D = D / Y = Y = Y						
Name of Federal Candidate	Support Office Soug	ht: House District:						
Shelley Capito	Oppose Presid	dent Senate State: WV						
Calendar Year-To-Date Per Election for Office Sought	Disburseme 2014	nt For:						
Full Name of Payee		of Public Distribution/Dissemination						
	Bute	M = M / D = D / Y = Y = Y						
Mailing Address	Amo	unt						
City State Zip C	Code							
	Date	of Disbursement or Obligation						
Purpose of Expenditure Cate	egory/ Type	M = M / D = D / Y = Y = Y						
Name of Federal Candidate	Support Office Soug	ht: House District:						
	Oppose Presid	dent Senate State:						
Calendar Year-To-Date Per Election for Office Sought	Disburseme	nt For:						
Other (specify)								
(a) SUBTOTAL of Itemized Independent Expenditures								
(b) SUBTOTAL of Unitemized Independent Expenditures								
(c) TOTAL Independent Expenditures	······································	17896.70						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.								
Mary Rose Adkins [Electronically 1	Filed] Date 10	30 2014						
Signature								

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OF

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